	Diesi,	1.vallable	Coa	est Av	/ailable	Copy
PATENT APPLICATION		Application or Docket Number				
Effec	tive October 1, 2	P309898089				
CLAIMS A	S FILED - PART (Column 1)	ENTITY	OTHER OR SMALL	THAN. ENTITY		
TAL CLAIMS	24		RAT	E FEE	RATE	FEE
1	NUMBER FILED	NUMBER EXTRA	BASIC	FEE 355.00	OR BASIC FEE	710.00

CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN												
		(Column 1)		(Colu	mn 2)	TYPE -		OR	SMALL ENTIT			
TOTAL CLAIMS		24	_	i		RATE	FEE		RATE	FEE		
FO	FOR NUMBER FILED NUMBER EXTRA		ER EXTRA	BASIC FEE	355.00	OR	BASIC FEE	710.00				
TOTAL CHARGEABLE CLAIMS 2 4 minus 20= -			4	X\$ 9=	•	OR	X\$18=	72:	0			
INDEPENDENT CLAIMS 5 minus 3 =					X40=	• .	ÖR	X80=		00		
MULTIPLE DEPENDENT CLAIM PRESENT							+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	TOTAL		OR	TOTAL	942	00
(a) Word CLAIMS AS AMENDED - PART II									,	OTHER	-	ľ
(Column 1) (Column 2) (Column 3)						(Column 3)	SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDM	Total	• 22	Minus	. a	14	<u>-</u> 2	X\$ 9=	,	OR	X\$18=		
AME	Independent	• 5	Minus	••• (	<u> </u>	-2	X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+135=		OR	+270=		ŀ
							TOTAL			TOTAL		
							ADDIT. FEE		OR	ADDIT. FEE	L	1
		(Column 1)		(Colu	mn 2) HEST	(Column 3)						1.
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	(BER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	ļ.
D WE	Total	•	Minus	20		=	X\$ 9=		OR	X\$18=		
ME	Independent	•	Minus	***		=	X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
							+135=		OR	+270=		
TOTAL OR ADDIT. FEE								1				
		(Column 1)		(Colu		(Column 3)	•					•
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Ş	Total	•	Minus	**		=	X\$ 9=		OR	X\$18=		1
ME	Independent	•	Minus ,	***		=	X40=			X80=	·	1
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM				OR	<u>-</u> -	,	1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										1		
"If the entry in column 1 is less than the entry in column 2, write "U" in column 3.  "If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "3."  The "High st Number Previously Paid For" (Total or Independent) is the highest number found in the appropriat box in column 1.												